CORRECTED FINANCIAL STATEMENT **AND** GOOD-FAITH AFFIDAVIT

04/20/2019 Attach Any Part of Your Financial Statement Form Needed to Report and Explain Corrections Filer Name (First, MI, Last) Account # The Honorable Mary Lou Keel 00026741 Receipt # Address (P.O. Box or Street Address, Apt. or Suite #) P.O. Box 12308 HD / PM Amount Date Processed (CHECK IF FILER'S HOME ADDRESS) Date Imaged (City, State, Zip Code) Austin, TX 78711 The correction(s) filed with this affidavit apply to my financial statement due in 2019. (Remember: The financial statement you file covers the preceding calendar year's activity. Thus a report due in 2015 covers information for calendar year 2014.) **Explanation of Correction** I left off our house that we bought in 2018. I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check ONLY if applicable: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the reports originally filed was made in good faith. The Honorable Mary Lou Keel AFFIX NOTARY STAMP / SEAL ABOVE Signature of Filer Sworn to and subscribed before me, by the said day of______, 20_____, to certify which, witness my hand and seal of office. Signature of officer administering oath Title of officer administering oath Printed name of officer administering oath

OFFICE USE ONLY

ELECTRONICALLY FILED

Date Received

FORM PFS PERSONAL FINANCIAL STATEMENT **COVER SHEET** PAGE 1 PAGE# Filed in accordance with chapter 572 of the Government Code. 18 For filings required in 2019, covering calendar year ending December 31, 2018. ACCOUNT # Use FORM PFS--INSTRUCTION GUIDE when completing this form. 00026741 1 NAME TITLE; FIRST; MI **OFFICE USE ONLY** The Honorable Mary Lou **ELECTRONICALLY FILED** NICKNAME; LAST; SUFFIX 04/20/2019 Keel 2 ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP Receipt # P.O. Box 12308 HD / PM Amount Austin, TX 78711 Date Processed (CHECK IF FILER'S HOME ADDRESS) **TELEPHONE** AREA CODE PHONE NUMBER; EXTENSION Date Imaged NUMBER REASON FOR FILIING STATEMENT CANDIDATE _____ (INDICATE OFFICE) ELECTED OFFICER ___Texas Court of Criminal Appeals (INDICATE OFFICE) APPOINTED OFFICER ______ (INDICATE AGENCY) EXECUTIVE HEAD _____ (INDICATE AGENCY) FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT STATE PARTY CHAIR ______ (INDICATE PARTY) OTHER _____ (INDICATE POSITION) **5** Family members whose financial activity you are reporting (see instructions). James Hippard Jr. SPOUSE **DEPENDENT CHILD** In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

SOURCES OF OCCUPATIONAL INCOME PART 1A If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD ___ 2 EMPLOYMENT NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER Texas Court of Criminal Appeals** ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 12308 Austin, TX 78711 **POSITION HELD** Judge NATURE OF OCCUPATION SELF-EMPLOYED

STOCK PART 2 If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. **BUSINESS ENTITY** NAME tnk STOCK HELD OR X FILER SPOUSE DEPENDENT CHILD **ACQUIRED BY** 3 NUMBER OF SHARES LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 X LESS THAN 10K 10,000 OR MORE 4 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NET LOSS

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	dissx	ı	NAME	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499	□ 500 то 999	X 1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	Black Rock bond Inde:		NAME	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	X 1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
F		ī			
	MUTUAL FUND	First Eagle Fund of an		NAME	
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	First Eagle Fund of an		NAME DEPENDENT CHILE)
	SHARES OF MUTUAL FUND		nerica		X 1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100	SPOUSE 100 TO 499	DEPENDENT CHILD	<u></u>
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	X FILER LESS THAN 100 5,000 to 9,999	nerica SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	X 1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND	X FILER LESS THAN 100 5,000 to 9,999	nerica SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILE	X 1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000	nerica SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	X 1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Davis New York Ventu	SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	X 1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Davis New York Ventu X FILER LESS THAN 100	SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	X 1,000 TO 4,999 \$25,000OR MORE

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	Fidelity Diversified Inte		NAME	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	☐ 500 TO 999	X 1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	Lord Abbett Small Cap		NAME	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100 X 5,000 to 9,999	100 TO 499 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND			NAME	
	MUTUAL FUND	Vanguard Wellington <i>I</i>		NAME	
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	Vanguard Wellington A		NAME DEPENDENT CHILD)
	SHARES OF MUTUAL FUND		Admiralty		1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100	Admiralty SPOUSE 100 TO 499	DEPENDENT CHILD	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN	X FILER LESS THAN 100 5,000 to 9,999	Admiralty SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD X 500 TO 999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000	Admiralty SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD X 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Vanguard Institutional	Admiralty SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD X 500 TO 999 \$10,000 - \$24,999 NAME	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Vanguard Institutional X FILER LESS THAN 100	Admiralty SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 Index SPOUSE 100 TO 499	DEPENDENT CHILD X 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	Vanguard Growth Inde		NAME	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499	X 500 TO 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
		•			
	MUTUAL FUND	SMMYX	1	NAME	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	X 1,000 TO 4,999
	IF SOLD NET GAIN X NET LOSS	X LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
		T			
	MUTUAL FUND	НІМҰХ	1	NAME	
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	HIMYX	X SPOUSE	NAME DEPENDENT CHILD)
	SHARES OF MUTUAL FUND				1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100	X SPOUSE 100 TO 499	DEPENDENT CHILD	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	FILER LESS THAN 100 X 5,000 to 9,999	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN X NET LOSS MUTUAL FUND	FILER LESS THAN 100 X 5,000 to 9,999	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	FILER LESS THAN 100 X 5,000 to 9,999 X LESS THAN \$5,000	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN X NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	FILER	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100 X 5,000 to 9,999 X LESS THAN \$5,000 IYLD FILER LESS THAN 100	 X SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999 X SPOUSE ☐ 100 TO 499 	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	NCV	1	NAME	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	X 1,000 TO 4,999
4	IF SOLD X NET GAIN NET LOSS	LESS THAN \$5,000	X \$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	MYI	ı	NAME	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	X 500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN X NET LOSS	X LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
⊢					
F	MUTUAL FUND		1	NAME	
	MUTUAL FUND	USMV	1	NAME	
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	USMV	X SPOUSE	NAME DEPENDENT CHILD)
	SHARES OF MUTUAL FUND				1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100	X SPOUSE X 100 TO 499	DEPENDENT CHILD	_
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN	FILER LESS THAN 100 5,000 to 9,999	X SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN X NET LOSS	FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000	X SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN X NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000 AOK	X SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN X NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000 AOK FILER LESS THAN 100	 X SPOUSE X 100 TO 499 ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999 X SPOUSE ☐ 100 TO 499 	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

MUTUAL FUNDS PART 4 If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. MUTUAL FUND NAME **SWTSX** SHARES OF MUTUAL FUND SPOUSE HELD OR ACQUIRED BY X FILER DEPENDENT CHILD NUMBER OF SHARES OF MUTUAL FUND LESS THAN 100 X 100 TO 499 500 TO 999 1,000 TO 4,999 5,000 to 9,999 10,000 OR MORE 4 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NET LOSS

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

	When reporting information abou which the child is listed on the Co	It a dependent child's activity, indicate the child about whom you are reporting by providing the number under over Sheet.
1	SOURCE OF INCOME	NAME AND ADDRESS Shady Bon Temps, Inc
	Publicly held corporation	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1205 W. 19th Street Houston, TX 77008
2	RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
3	AMOUNT	\$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

	which the child is listed on the Co	ver Sneet.			
1	PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Daigle, Josephine an	d Armand		
2	LIABILITY OF	X FILER	SPOUSE	X DEPENDENT CHIL	D <u>1</u>
3	GUARANTOR	NONE			
4	AMOUNT	X \$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Kellams, Shea (Ms.)			
	LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHIL	D
	GUARANTOR	NONE			
	AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	X \$10,000 - \$24,999	\$25,000OR MORE
	PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Executive Affiliates, I	nc		
	LIABILITY OF	X FILER	SPOUSE	X DEPENDENT CHIL	D <u>1</u>
	GUARANTOR	NONE			
	AMOUNT	\$1,000 - \$4,999	X \$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE

INTERESTS IN REAL PROPERTY

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

1 HELD OR ACQUIRED BY ☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD 2 STREET ADDRESS STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE ☐ NOT AVAILABLE 1206 W. 20th and 1205 W. 19th ☐ CHECK FILERS Houston, TX 77008 3 DESCRIPTION NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED ☐ LOTS ACRES ☐ ACRES Ceniar FSB I NAMES OF PERSONS Ceniar FSB ☐ INTERCENT ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,0000 - \$24,999 ☒ \$25,000-OR MORE HELD OR ACQUIRED BY ☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD STREET ADDRESS ☐ NOT AVAILABLE ☒ OLICEX FILERS ☐ NOT AVAILABLE ☐ LOTS ☐ 1,00000 lots ☐ LOTS ☐ ACRES 1,00000 lots ☐ LOTS ☐ ACRES Travis INAMES OF PERSONS RETAINING AN INTEREST ☐ NOT APPLICABLE (SEVERED MINERAL INTEREST) ☐ NOT APPLICABLE (SEVERED MINERAL INTEREST) ☐ NOT APPLICABLE (SEVERED MINERAL INTEREST) ☐ NOT APPLICABLE (SEVERED MINERAL INTEREST) ☐ NOT APPLICABLE (SEVERED MINERAL INTEREST) ☐ NOT APPLICABLE (SEVERED MINERAL INTEREST)						
NOT AVAILABLE CHECK IF FILERS Houston, TX 77008	1	HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILE	D
DESCRIPTION NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED	2	STREET ADDRESS			IDING CITY, COUNTY, AND	STATE
HOME ADDRESS HOUSTON, TX 77008 3 DESCRIPTION SUCTS CACRES LOTS		=	1206 W. 20th and 1	.205 W. 19th		
3 DESCRIPTION □ LOTS □ ACRES 4 NAMES OF PERSONS RETAINING AN INTEREST □ NOT APPLICABLE □ CENSERD MINERAL INTEREST) HELD OR ACQUIRED BY I FILER I SPOUSE □ DEPENDENT CHILD STREET ADDRESS □ NOT AVAILABLE □ CHICK IF FLEES □ HOME ADDRESS □ LOTS □ ACRES NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED NUMBER OF LOTS OR ACRES AND NAME OF COUNTY, AND STATE NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots □ ACRES NAMES OF PERSONS RETAINING AN INTEREST □ NOT APPLICABLE (SEVERBED MINERAL INTEREST) NAMES OF PERSONS RETAINING AN INTEREST □ NOT APPLICABLE (SEVERBED MINERAL INTEREST) NAMES OF PERSONS RETAINING AN INTEREST □ NOT APPLICABLE (SEVERBED MINERAL INTEREST) NAMES OF PERSONS RETAINING AN INTEREST □ NOT APPLICABLE (SEVERBED MINERAL INTEREST) NAMES OF PERSONS RETAINING AN INTEREST □ NOT APPLICABLE (SEVERBED MINERAL INTEREST)			Houston, TX 77008	.		
2.0000 lots Harris			·			
Harris 4 NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST) 5 IF SOLD X NET GAIN NET LOSS LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 X \$25,000 - OR MORE HELD OR ACQUIRED BY X FILER X SPOUSE DEPENDENT CHILD STREET ADDRESS STREET ADDRESS ON AVAILABLE CHECK IF FILERS HOME ADDRESS DESCRIPTION LOSS NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Travis NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST) NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 X \$25,000 - OR MORE	3	DESCRIPTION	NUMB	ER OF LOTS OR ACRES A	ND NAME OF COUNTY WHI	ERE LOCATED
4 NAMES OF PERSONS RETAINING AN INTEREST ONT APPLICABLE (SEVERED MINERAL INTEREST) DIESCRIPTION STREET ADDRESS ONT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION INTEREST NOT AVAILABLE ACRES NOT AVAILABLE INTEREST NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS TRANSS OND SECOND SEC		X LOTS	2.00000 lots			
RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST) IF SOLD		ACRES	Harris			
NOT APPLICABLE (SEVERED MINERAL INTEREST) NOT APPLICABLE (SEVERED MINERAL INTEREST) STREET ADDRESS	4		Cenlar FSB			
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5 IF SOLD NET GAIN NET LOSS LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$\$25,000-OR MORE HELD OR ACQUIRED BY \$\text{X}\$ FILER \$\text{X}\$ SPOUSE DEPENDENT CHILD		(SEVERED MINERAL				
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RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST) IF SOLD NET GAIN LESS THAN \$5,000		STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION	NUMB	STREET ADDRESS, INCLU	DIDING CITY, COUNTY, AND	STATE
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LESS THAN \$5,000		STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION ACRES NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL	NUMBI 1.00000 lots	STREET ADDRESS, INCLU	DIDING CITY, COUNTY, AND	STATE
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LESS THAN \$5,000		STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION ACRES NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL	NUMBI 1.00000 lots	STREET ADDRESS, INCLU	DIDING CITY, COUNTY, AND	STATE
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		STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION LOTS ACRES NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)	NUMBI 1.00000 lots Travis	STREET ADDRESS, INCLU	IDING CITY, COUNTY, AND	STATE ERE LOCATED

OWNERSHIP OF BUSINESS ASSOCIATIONS

PART 11A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 5 percent or more of the outstanding ownership. For more information, see FORM PFS--INSTRUCTION GUIDE.

the child is listed on the Cover	Sheet.
1 BUSINESS ASSOCIATION	NAME AND ADDRESS (Check If Filer's Home Address) Jim Hippard and Dennis Whitworth
	1206 W. 20th and 1205 W. 19th
	Houston, TX 77008
2 DESCRIPTION	
3 BUSINESS TYPE	Corporation Limited Partnership Profesional Association Firm Limited Liability Partnership Joint Venture X Partnership Professional Corporation Other
4 HELD, ACQUIRED, OR SOLD BY	FILER X SPOUSE DEPENDENT CHILD
1 BUSINESS ASSOCIATION	NAME AND ADDRESS (Check If Filer's Home Address) Nylorac Holdings, LLC 1707 Post Oak Blvd. Suite 255 Houston, TX 77056
2 DESCRIPTION	
3 BUSINESS TYPE	Corporation Limited Partnership Profesional Association Limited Liability Partnership Joint Venture Partnership Professional Corporation X Other
4 HELD, ACQUIRED, OR SOLD BY	FILER X SPOUSE DEPENDENT CHILD

ASSETS OF BUSINESS ASSOCIATIONS

PART 11B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

the child is listed on the Cov	er Sheet.			
1 BUSINESS		NAM	IE AND ADDRESS	
ASSOCIATION		(Check	If Filer's Home Address)	
	Jim Hippard and De	nnis Whitworth		
	1206 W. 20th and 1			
	Haveton TV 77000			
	Houston, TX 77008			
2 BUSINESS TYPE	Partnership			
2 200200 2	T di tilei Ship			
3 HELD, ACQUIRED,				
OR SOLD BY	FILER	X SPOUSE	DEPENDENT CHILD _	
4 ASSETS	D	ESCRIPTION	CAT	EGORY
	Land		LESS THAN \$5,000	\$5,000 - \$9,999
			I LESS THAN \$5,000	\$5,000 - \$9,999
			\$10,000 - \$24,999	X \$25,000 OR MORE
			<u> </u>	

LIABILITIES OF BUSINESS ASSOCIATIONS

PART 11C

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

l	the child is listed on the Cover S	Sheet.			
1	BUSINESS		NAM	E AND ADDRESS	
l	ASSOCIATION		(Check	If Filer's Home Address)	
l		Jim Hippard and De	nnis Whitworth		
l		1206 W. 20th and 1			
l		1200 W. 2011 and 1	203 W. 1301		
l					
l		Houston, TX 77008			
2	BUSINESS TYPE				
l		Partnership			
3	HELD, ACQUIRED,				
ľ	OR SOLD BY	FILER	X SPOUSE	DEPENDENT CHILD _	
Ļ	ABU ITIEO		FOODIDTION	1	-000
4	LIABILITIES		ESCRIPTION	i	EGORY
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PERSONAL FINANCIAL STATEMENT

PARTS MARKED "NOT APPLICABLE" BY FILER

FORM PFS
COVER SHEET
PAGE 2

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. If you place a check in a box, do NOT include pages for that Part in the report.

6	PAR	TS NOT APPLICABLE TO FILER
		N/A Part 1A - Sources of Occupational Income
	Χ	N/A Part 1B - Retainers
		N/A Part 2 - Stock
	Χ	N/A Part 3 - Bonds, Notes & Other Commercial Paper
		N/A Part 4 - Mutual Funds
		N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
		N/A Part 6 - Personal Notes and Lease Agreements
		N/A Part 7A - Interests in Real Property
	X	N/A Part 7B - Interests in Business Entities
	Х	N/A Part 8 - Gifts
	Х	N/A Part 9 - Trust Income
	X	N/A Part 10A - Blind Trusts
	Х	N/A Part 10B - Trustee Statement
		N/A Part 11A - Business Associations
		N/A Part 11B - Assets of Business Associations
		N/A Part 11C - Liabilities of Business Associations
	Χ	N/A Part 12 - Boards and Executive Positions
	Χ	N/A Part 13 - Expenses Accepted Under Honorarium Exception
	Х	N/A Part 14 - Interest in Business in Common with Lobbyist
	Х	N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
	Х	N/A Part 16 - Representation by Legislator Before State Agency
	Χ	N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
	Χ	N/A Part 18 - Legislative Continuances
	Χ	N/A Part 19 - Contracts with Governmental Entity
	Χ	N/A Part 20 - Bond Counsel Services Provided by a Legislator

erification page on a personal statement filed electronically valual required to file the personal financial statement. erification page on a personal financial statement filed with a	Vithout proper verification, the statement is not considered filed. with the Texas Ethics Commission must have the electronic signature of the an authority other than the Texas Ethics Commission must have the signature wells as the signature and stamp or seal of office of a notary public or other of the signature and stamp or seal of office of a notary public or other of the signature and stamp or seal of office of a notary public or other of the signature and statement covers calendar year ending December 31, 2018, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code. The Honorable Mary Lou Keel Signature of Filer
dual required to file the personal financial statement. erification page on a personal financial statement filed with a individual required to file the personal financial statement as	I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2018, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code. The Honorable Mary Lou Keel
individual required to file the personal financial statement as	I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2018, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code. The Honorable Mary Lou Keel
	covers calendar year ending December 31, 2018, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code. The Honorable Mary Lou Keel
	·
	Signature of Filer
IX NOTARY STAMP / SEAL ABOVE	
rn to and subscribed before me, by the said	, this the day
, 20, to certify which, witness	s my hand and seal of office.
ignature of officer administering oath Printed name	e of officer administering oath Title of officer administering oath

TEXT ANNOTATION Sch: 1/1 Rpt: 18/18 FILER NAME Filer ID (Ethics Commission Filers) Keel, Mary Lou (The Honorable) 00026741 Schedule Corrected Items **Tracking Info Record Detail Record Type** Real Property Info Report Report Info Report 100745008 Family Member Info Report Keel, Mary Lou (The Honorable) Family Member Info Report Hippard Jr., James